

FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

FILED

Apr 14 1997 8:00am
Secretary of StatePROFIT
CORPORATION
ANNUAL REPORT
1997FLORIDA DEPARTMENT OF STATE
Sandra B. Monahan
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # F53813

(4)

1. Corporation Name

PRONTO BUSINESS CARD COMPANY

Principal Place of Business

1167 S W 6TH STREET
MIAMI FL 33130

Mailing Address

1167 S W 6TH STREET
MIAMI FL 33130-31033. Date Incorporated or Qualified
11/16/19813a. Date of Last Report
06/18/1996

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

Country

24

2a. Mailing Address

26 17266 N.W. 73rd COURT

Suite, Apt. #, etc.

27 City & State

28 HIALEAH, FLORIDA

Zip

29 33015

Country

30 DADE

4. FEI Number

59-2139829

Applied For

Not Applicable

5. Certificate of Status Desired

☐\$8.75 Additional
Fee Required6. Election Campaign Financing
Trust Fund Contribution☐\$5.00 May Be
Added to Fees8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes☐

Yes

☐

No

9. Name and Address of Current Registered Agent

SOLA, ANTONIO
1250 SW 13TH ST
MIAMI, FL

10. Name and Address of New Registered Agent

81 Name

ANTONIO SOLA

82 Street Address (P.O. Box Number is Not Acceptable)

17266 N.W. 73rd COURT

83

84 City

HIALEAH,

FL

85 Zip Code

33015

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, to the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with and understand the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature must be printed name of registered agent and the if applicable.

(NOTE: Registered Agent signature required when reinstating)

4/7/97

DATE

12. OFFICERS AND DIRECTORS

1.1 TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY - ST - ZIP
1.5 TITLE
1.6 NAME
1.7 STREET ADDRESS
1.8 CITY - ST - ZIP
1.9 TITLE
1.10 NAME
1.11 STREET ADDRESS
1.12 CITY - ST - ZIP2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY - ST - ZIP
2.5 TITLE
2.6 NAME
2.7 STREET ADDRESS
2.8 CITY - ST - ZIP
2.9 TITLE
2.10 NAME
2.11 STREET ADDRESS
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6.8 CITY - ST - ZIP
6.9 TITLE
6.10 NAME
6.11 STREET ADDRESS
6.12 CITY - ST - ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY - ST - ZIP
1.5 TITLE
1.6 NAME
1.7 STREET ADDRESS
1.8 CITY - ST - ZIP
1.9 TITLE
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6.9 TITLE
6.10 NAME
6.11 STREET ADDRESS
6.12 CITY - ST - ZIP

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/7/97 (305) 819-3350

CP2E034 (9/96)